

Permit ID - 02-339633

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 513314

A 48047

DISTRICT _____

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~XXXXXXX~~ 410-313-2640

DATE 3/13/2000

DATE SYSTEM APPROVED 3/15/00

INSPECTOR S.R.K.

D & W Excavating

IS PERMITTED TO INSTALL ☒ ALTER

ADDRESS 3033 Salem Bottom Road, Westminster, MD 21157

PHONE 410-875-2195

SUBDIVISION Burleigh Manor

LOT 765

ROAD 10410 Queensway Drive

PROPERTY OWNER Roger Calvert

ADDRESS _____

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

210 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 168 210

TRENCHES - Trench to be 2 feet wide. Inlet 8 feet below original grade. Bottom maximum depth 8 feet below original grade. Effective area begins at 3 feet below original grade. 48 feet of stone below distribution pipe.

LOCATION - Place the distribution box 170 feet from the front lot line and 95 feet from the left lot line. Run trenches along contour toward right side of property.

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. OK/ML

PLANS APPROVED BY C. Williams/Amy McMillen

DATE 5-27-1999

COVER NO WORK UNTIL INSPECTED AND APPROVED

NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM

NOTE: CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM HOUSE TO DRAIN FIELDS, 90° ELBOWS NOT ACCEPTABLE.

NOTE: ALL PARTS OF SEPTIC SYSTEMS (I.E. TANK, DISTRIBUTION BOX TRENCHES) TO BE 100 FEET FROM WELL (UNLESS OTHERWISE SPECIFICALLY AUTHORIZED)

NOTE: IF DEEP TRENCH(ES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH(ES)

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH

NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 35/40 PVC OR ABS

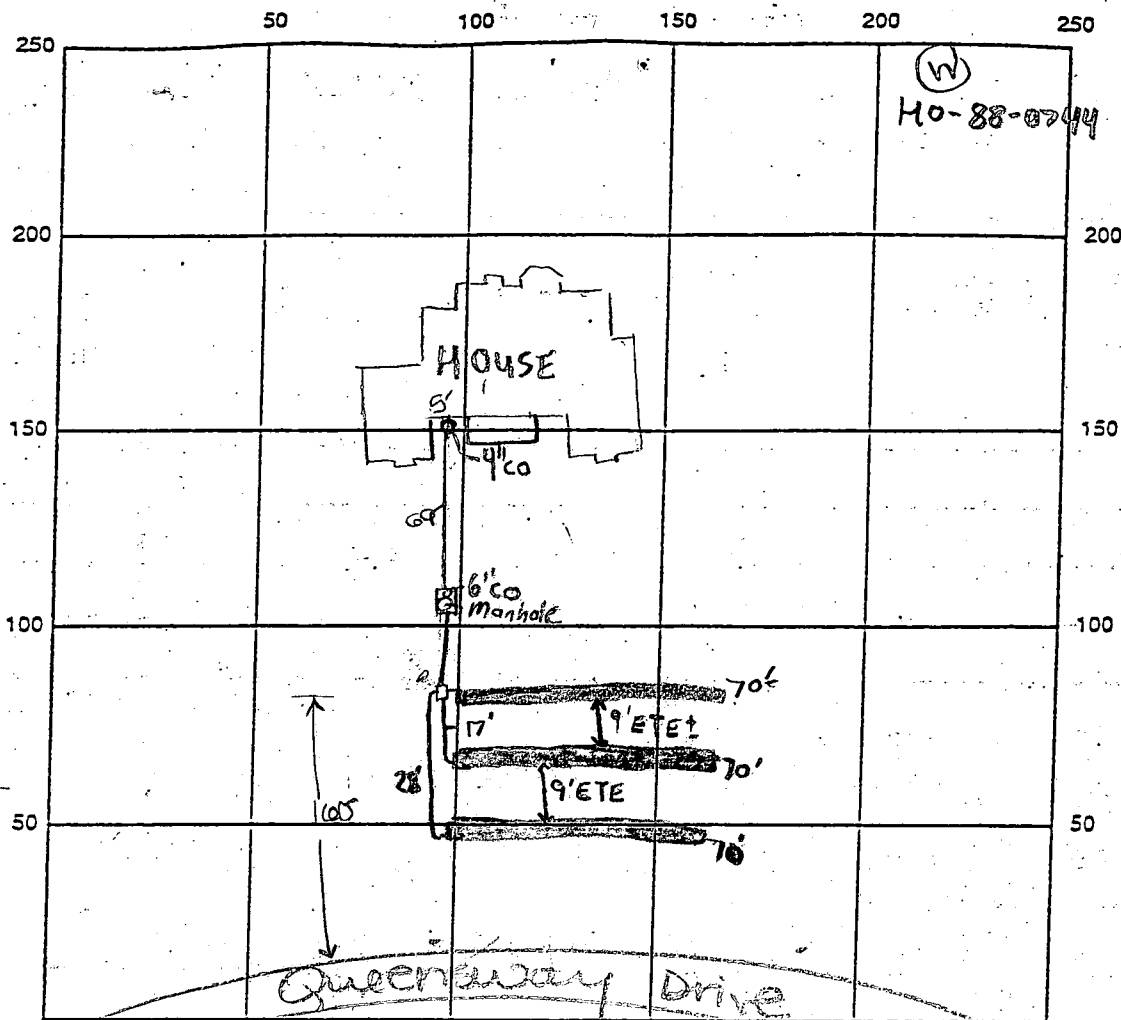
PERMIT VOID AFTER TWO YEARS

NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL STAND PIPES MUST BE 6 INCHES IN DIAMETER CAST IRON, CONCRETE OR TERRA COTTA OR PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET, MANHOLE TO GRADE REQUIRED.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEM.



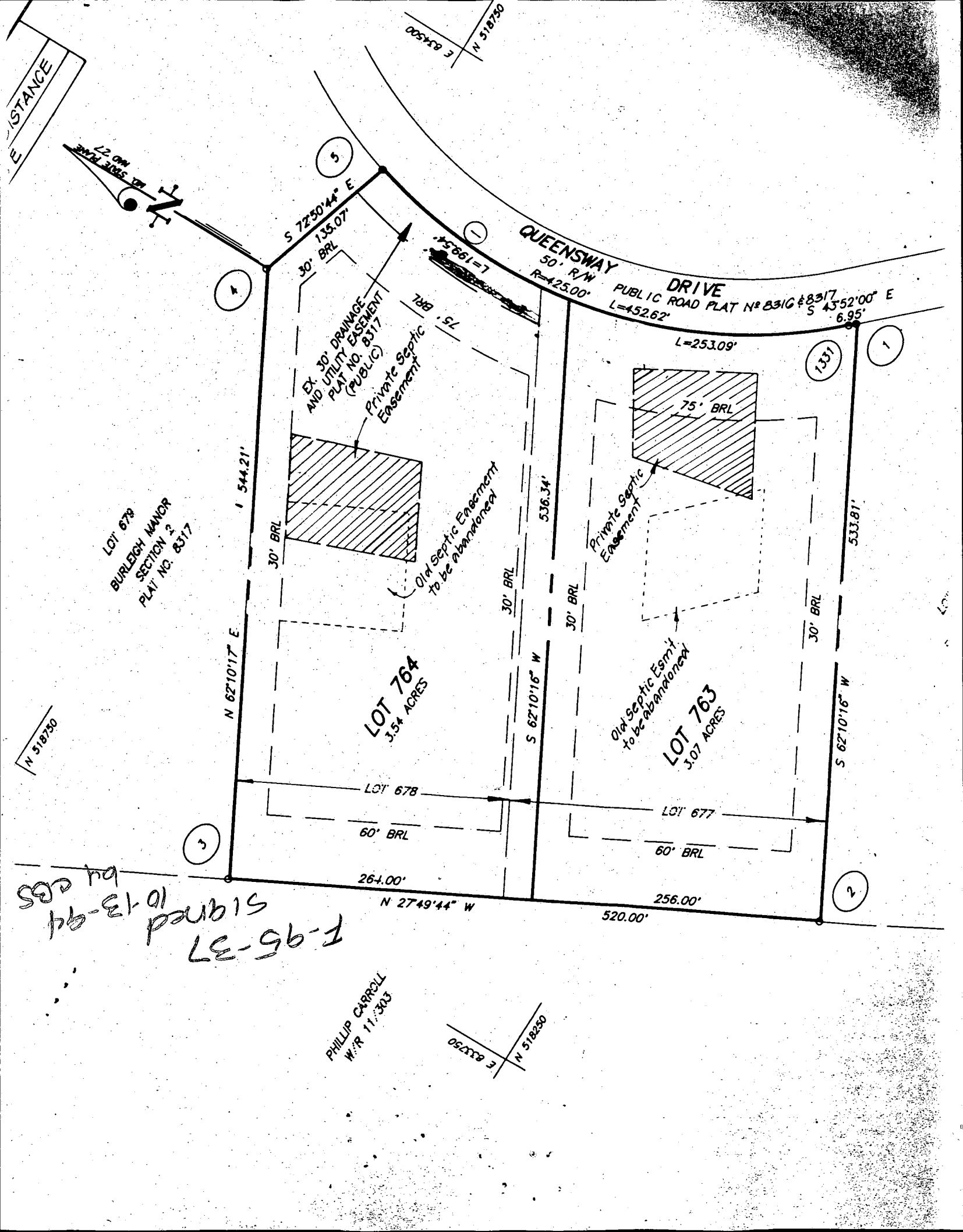
INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL OK-1250 gal CLEANOUTS 4" one at house, 6" one on sit.
 DISTRIBUTION BOX LEVEL OK Baffle 15 in manhole on sit.
 DRAIN FIELD/TITLE DEPTH 8' FT. TRENCH WIDTH 2 FT. INLET DEPTH 4 FT.
 EFFECTIVE GRAVEL DEPTH 4 FT. TOTAL LENGTH 210 FT.
 NUMBER OF TRENCHES 3 ONE SIDEWALL/SOTTOM AREA 840 SQ. FT.
 DRYWALL INSIDE DIAMETER FT. EFFECTIVE DEPTH BELOW INLET FT.
 ABSORBENT AREA SQ. FT.

REMARKS: 3/14/00 p.m. Plumbing exits house lower than approved
house raised 8" but pipe exits house below bsmt floor
I approved change in dist box location and revised
plans. DKS 3/15/00 - OK TO CONTINUE WORK (SRW) 3/15/00 - OK TO FINISH
AND COVER ALL WORK (SRW)

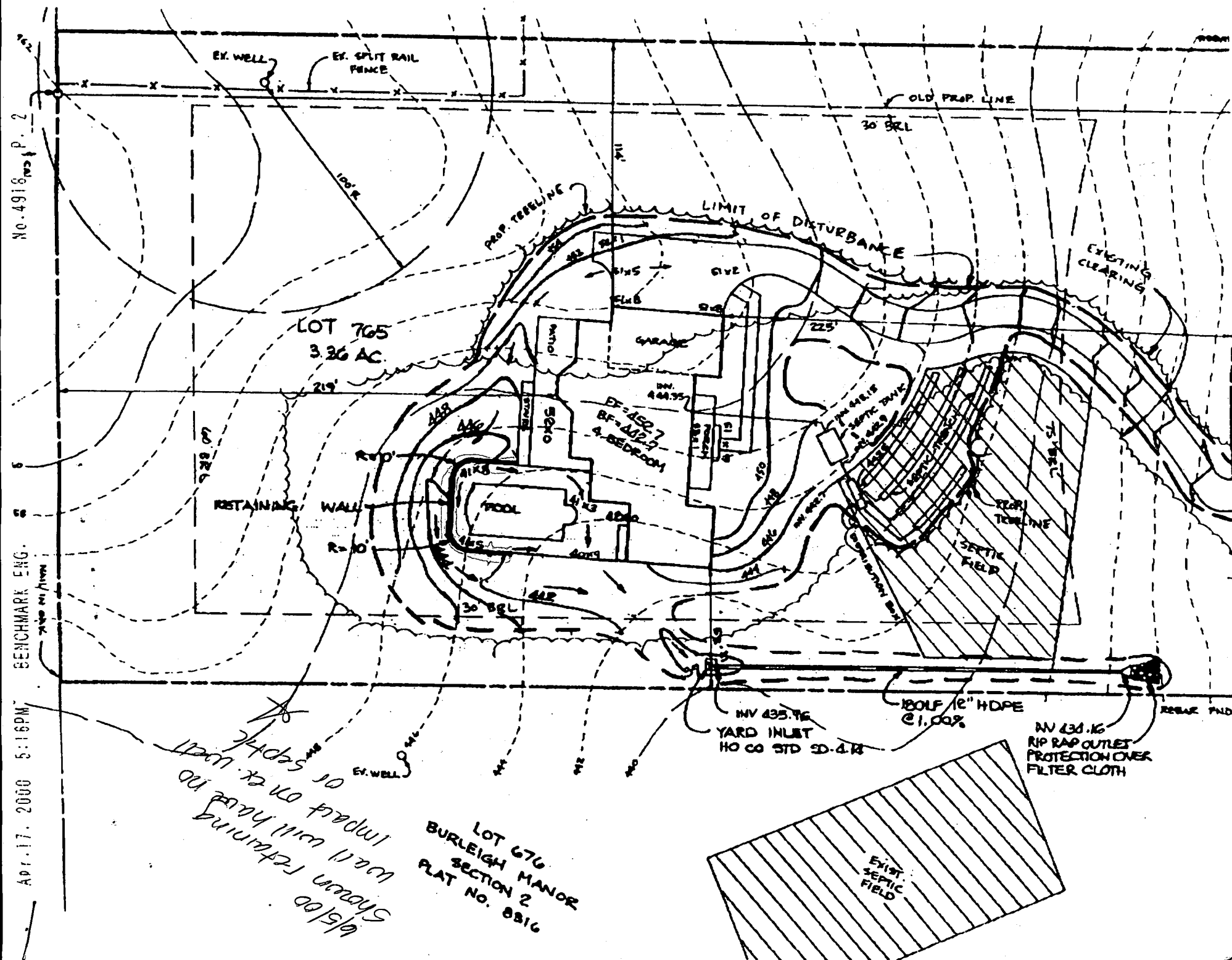
DATE SYSTEM APPROVED 3/15/00 INSPECTOR Steven R. Kiez

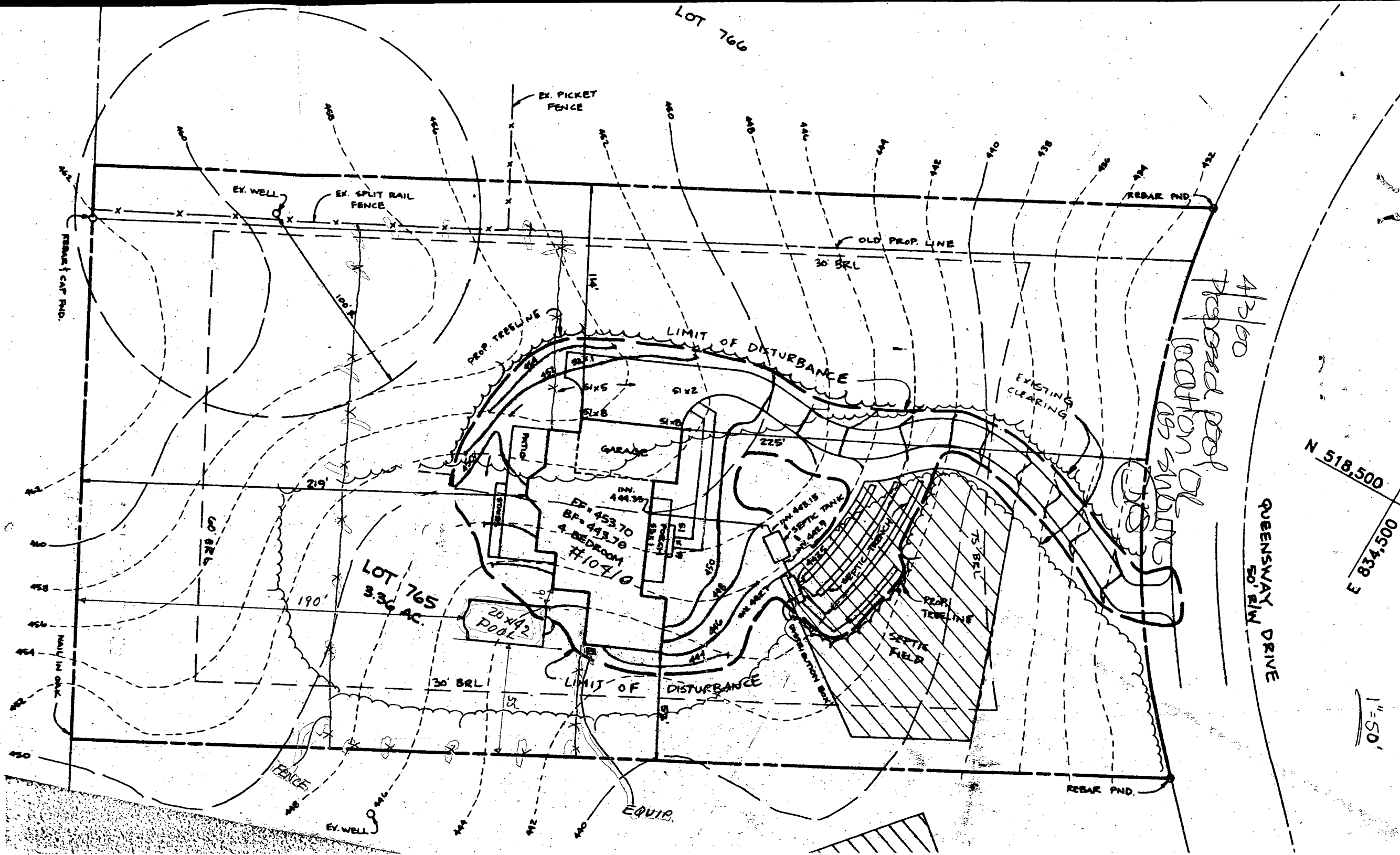
3/14/00 p.m. WPT - well line 4' below grade, well casing 1'
above grade, PVC conduit pipe OK, 2pc cap OK. OK to cover
DIS



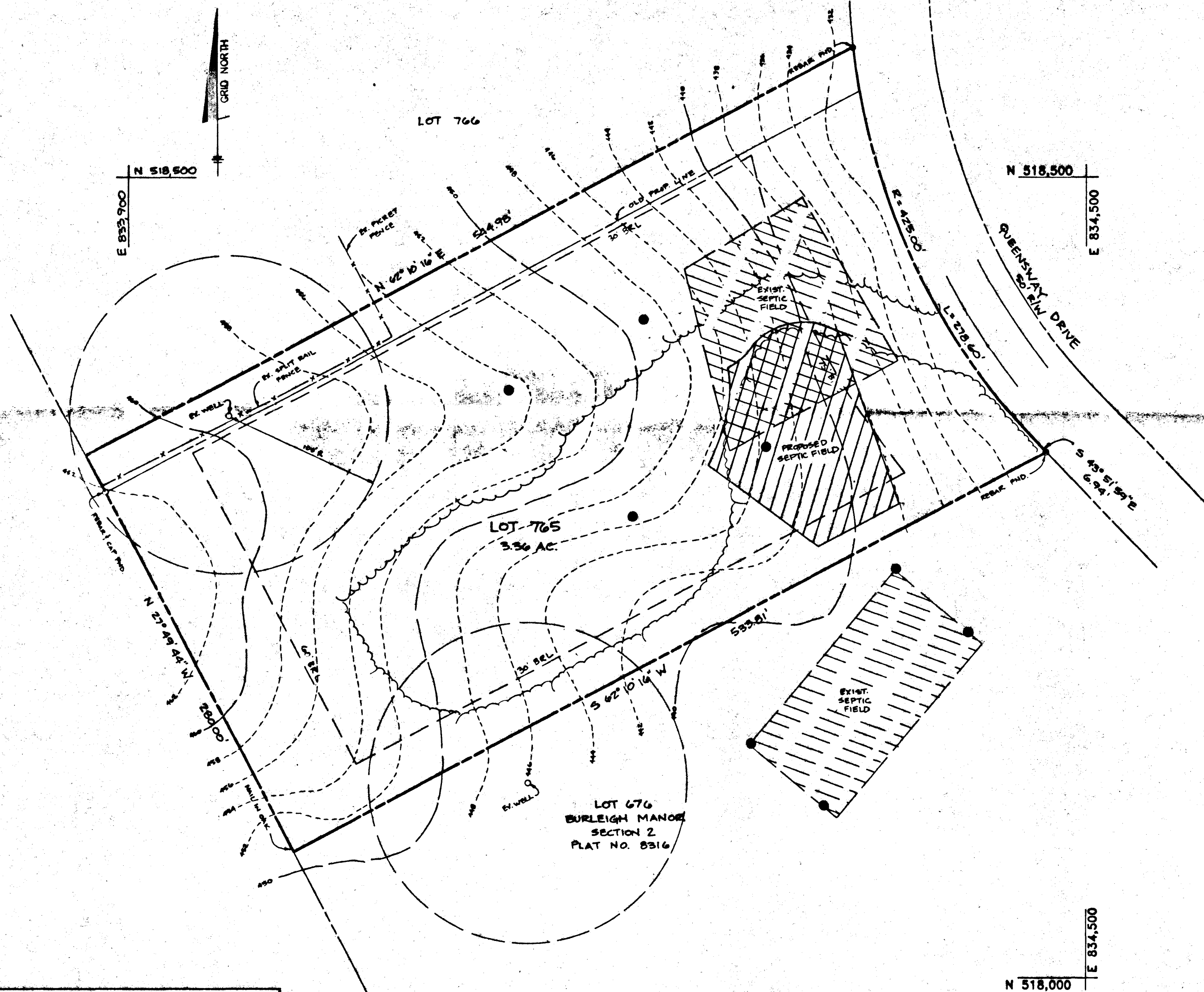
1-95-37
signed 10-13-94
by GCS

PHILIP CARROLL
W/R 11-303

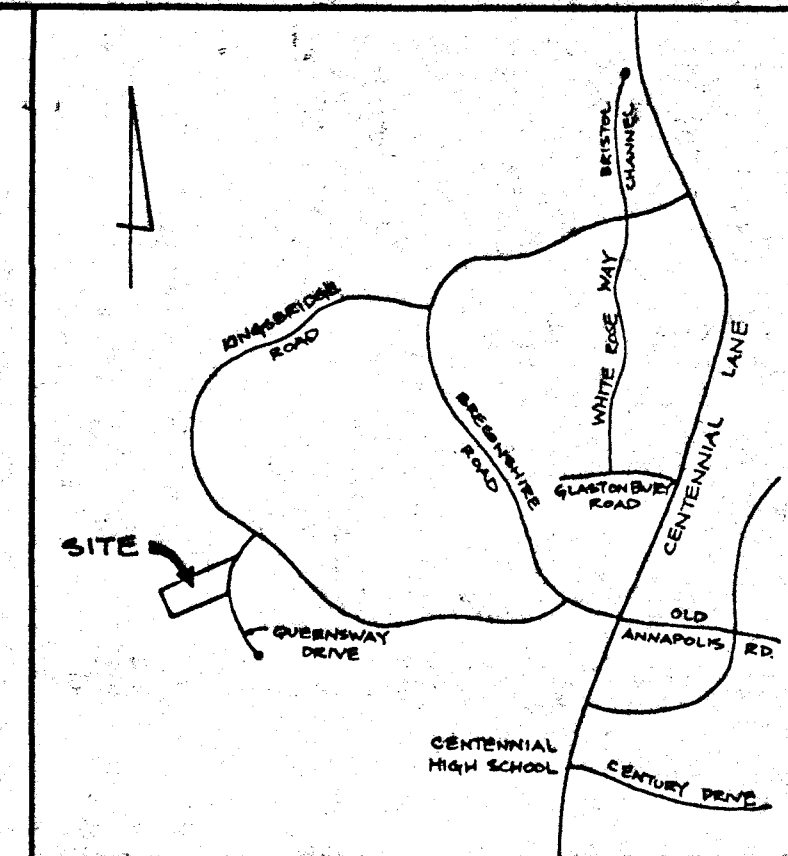




Plotted: May 3, 1999
Acad Dwg: 8091



PLAN
SCALE: 1" = 50'



VICINITY MAP
SCALE: 1" = 2000'

NOTES

1. THE LOT SHOWN HEREON COMPLEIES WITH THE MINIMUM OWNERSHIP WIDTH AND LOT AREAS AS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF THE ENVIRONMENT.
2. THIS AREA DESIGNATES A PRIVATE SEWERAGE EASEMENT OF 10,000 SQUARE FEET AS REQUIRED BY THE STATE DEPARTMENT OF THE ENVIRONMENT FOR INDIVIDUAL SEWERAGE DISPOSAL. IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED UNTIL PUBLIC SEWER IS AVAILABLE. THESE EASEMENTS SHALL BECOME NULL AND VOID UPON CONNECTION TO A PUBLIC SEWERAGE SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE THE AUTHORITY TO GRANT VARIANCES FOR ENCROACHMENT INTO THE PRIVATE SEWERAGE EASEMENT. RECORDATION OF A MODIFIED SEWERAGE EASEMENT PLAT SHALL NOT BE NECESSARY.
3. UNLESS OTHERWISE SHOWN, NO WELLS OR SEWERAGE EASEMENTS ARE LOCATED WITHIN 100 FEET OF THE PROPERTY.
4. TOPOGRAPHY SHOWN HEREON IS TAKEN FROM PREVIOUS PLAT PLAN PROVIDED BY CLIENT.
5. EXACT LENGTH OF SEPTIC TRENCHES TO BE DETERMINED BY THE HEALTH DEPARTMENT AT THE TIME OF PERMIT ISSUANCE.
6. ● DENOTES PERCOLATION TEST

BENCHMARK
ENGINEERS • LAND SURVEYORS • PLANNERS
ENGINEERING, INC.

8480 BALTIMORE NATIONAL PIKE • SUITE 418 • ELLICOTT CITY, MARYLAND 21043
PHONE: 410-465-6105 FAX: 410-465-6844

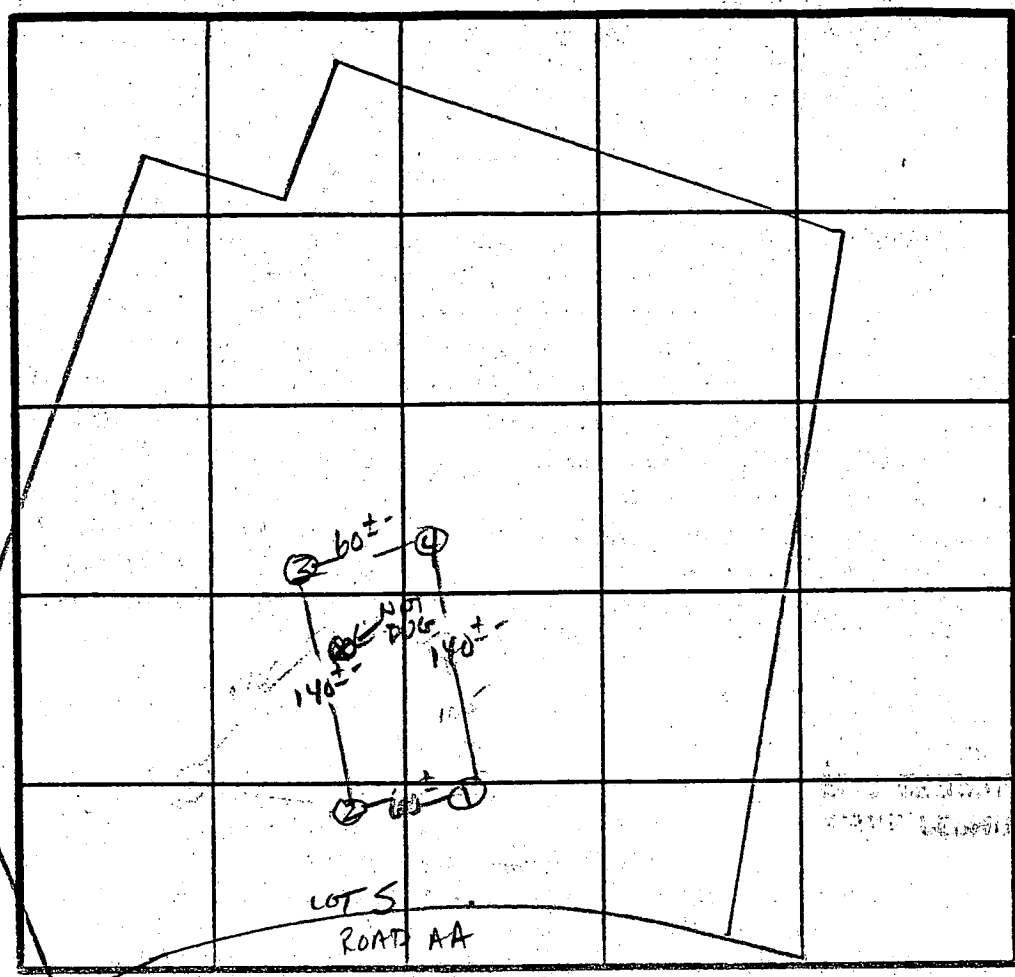
APPROVED: FOR PRIVATE WATER AND SEWER SYSTEMS, HOWARD COUNTY HEALTH DEPARTMENT.

Donna M. Mott
COUNTY HEALTH OFFICER RLM
5/27/99
DATE

PROJECT:		BURLEIGH MANOR SECTION 2 - LOT 765	
LOCATION:		TAX MAP 23 - GRID 24 PARCEL 290 2nd ELECTION DISTRICT HOWARD COUNTY, MARYLAND	
TITLE:		<i>Signed</i> PERCOLATION CERTIFICATION	
DATE:	MAY 25, 1999	PROJECT NO.	1265
SCALE:	AS SHOWN	DRAWING	1 OF 1

④
① ② ③
SOIL PROFILE

4" A1-3
YELLOW RED
SILTY LOAM
9-12% CLAY
FEW SMALL
QUARTZ STONE
15-25%
FRAGS
4-5' Yellow Bk
SILTY SAND
LOAM
20-25%
FRAGS
13-14'



$\bar{X} = 15 \text{ min}$
INLET 4½
MAX D 8½
210 Ø / BDRM

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
3/24/87	1V	13.5" UNIFORM SOIL below 4"					
	2S	5"	10:45	10:56	10:56	11:20	24 MIN
	2V	13" UNIFORM SOIL below 4.5"					
	3S	4"	10:55	10:57	10:57	11:02	5 MIN
	3V	13" UNIFORM SOIL below 4.0"					
	4S	4.5"	10:50	11:03	11:03	11:30	27 MIN
	4M	9"	10:48	10:49	10:49	10:52	3 MIN
	4V	14" UNIFORM SOIL below 4"					

REMARKS Holos Per PLAT
TYPE OF SOIL Chester Granely Lm.
TESTED BY S. Abel ALSO PRESENT Bill, Rocky

EH 12.10/9

5/8/92 - RAN OUT
10:00 AM
5/13/92

APPLICATION

PERCOLATION TESTING

A 48047
P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
P.O. BOX 476 ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 461-9933

PREVIEW OIL,
PROPOSAL IS TO
ADJUST PLATTED
SEPTIC AREA.

DISTRICT _____
DATE 4/21/92

NO NEARBY WELLS
- OPEN SPACE ACROSS STREET.

4/24/92 CW

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I HEREBY APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER DAVID CARNEY

ADDRESS 3821 THOROUGHbred Lane, OWINGS MILLS, MARYLAND 21117 PHONE 356-5647

AGENT N/A (SAME) MICHAEL LANCE

PROSPECTIVE BUYER _____
ADDRESS N/A 8965 GUILFORD RD., COLUMBIA 21046 PHONE (SAME) 720-5071

PROPERTY LOCATION:

SUBDIVISION THE PRESERVE (BURREIGH MANOR) LOT NO. 677

ROAD AND DESCRIPTION 10410 QUEENSWAY DRIVE

TAX MAP 23 PARCEL # 290

SIZE OF LOT 3.36 ACRES

BLDG. PERMIT SIGNED

AND RETURNED 4/20/92

Serial # 43879
SINGLE FAMILY - 5 Bdr
(SINGLE FAMILY DWELLING OR COMMERCIAL)

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE. I FULLY UNDERSTAND THE FEE CONNECTED WITH THE FILING OF THIS PERC TEST APPLICATION IS NON-REFUNDABLE UNDER ANY CIRCUMSTANCES. I ALSO AGREE TO COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT.

Michael J. Theis

(SIGNATURE OF APPLICANT)

APPROVED BY CWILL FOR TRENCHES DATE 6/16/92

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS PLAT CWILL DATE 5/13/92

REASONS FOR REJECTION OR HOLDING PERC PLAT OK 6/24/92 CW

BB SIGNED SAME DATE.

BLDG. PERMIT SIGNED

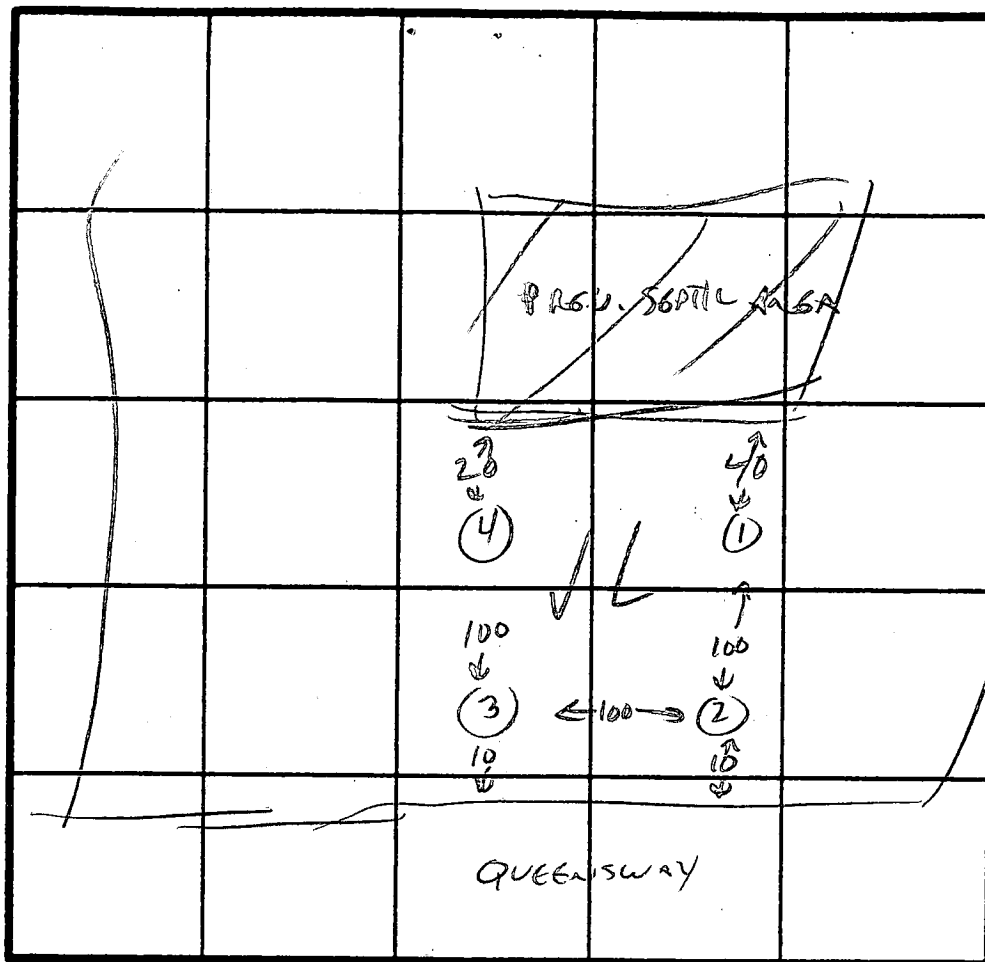
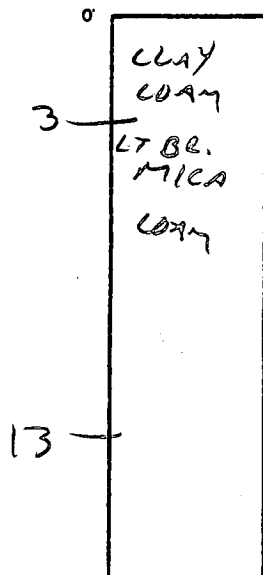
AND RETURNED 4/22/92

Serial # 43879
5 Bedroom

THIS IS NOT A PERMIT

ALL HOLDS

SOIL PROFILE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

X 3 MIN
480
INLET 3'
BOTTOM 8'

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
5/13/92	1	3 9	10:38	10:39	10:39	10:41	2 min
		13		VIS	OK - LOAM		
	2	3 9		VIS	OK LOAM		
		13					
	3	3 9	10:42	10:44	10:44	10:47	3 min
		13		VIS	OK LOAM		
	4	NOT DUG - REFERRED TO PREVIOUS					OK

REMARKS

TYPE OF SOIL

TESTED BY

ALSO PRESENT

MICA LOAM

CW

BUILDING

APPLICATION

PERCOLATION TESTING

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
P.O. BOX 476 ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 461-9933

A 38514

P _____

DISTRICT _____

DATE 1-28-87

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I HEREBY APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Gerald M. Katz, Trustee c/o Whitman, Requardt and Associates

ADDRESS 2315 Saint Paul Street, Baltimore, MD 21218 PHONE (301) 235-3450

PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

LOT 677 on Prelim

SUBDIVISION Burleigh Manor Section 2 LOT NO. 6

ROAD AND DESCRIPTION West of the intersection of Centennial Lane and Old Annapolis Road

TAX MAP 23, 24 PARCEL # 290

SIZE OF LOT 3 Ac. TYPE BLDG. Single Family Dwelling
(SINGLE FAMILY DWELLING OR COMMERCIAL)

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE. I FULLY UNDERSTAND THE FEE CONNECTED WITH THE FILING OF THIS PERC TEST APPLICATION IS NON-REFUNDABLE UNDER ANY CIRCUMSTANCES. I ALSO AGREE TO COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT. [Signature]

(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 3-26-87 Percol satisfactory - hold for subdivision plat. S. Hall

THIS IS NOT A PERMIT

B 1	5657	SEQUENCE NO. (DP USE ONLY)	STATE OF MARYLAND PERMIT TO DRILL WELL please print or type	STATE PERMIT NUMBER H0-88-0744 fill in this form completely
(THIS NUMBER IS TO BE PUNCHED IN COLS. 36 ON ALL CARDS)				
Date Received (APA) 052389		LOCATION OF WELL 8 COUNTY Howard 21 23 SUBDIVISION BUFFLECH MHWCR 42 SECTION 2 44 46 LOT 677 48 50 52 NEAREST TOWN ELLICOTT CITY 71 MILES FROM TOWN (enter 0 if in town) 3 1/2 73 76 77 78		
OWNER INFORMATION 15 Last Name GREENBAY Owner KCS First Name ASS. 34 36 Street or RFD 1777 RICE ST 55 57 Town ROLIMORE 70 State 72 MD Zip 21208 76		DRILLER INFORMATION Driller's Name Joseph P. Mayne 77 License No. 80 Firm Name Joseph L. Mayne & Sons Drilling Address 5512 Ridge Rd. Mt. Airy, MD Signature Joseph P. Mayne Date 5/22/89		
WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) 5 8 12 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500 14 20		DIRECTION OF WELL FROM TOWN (CIRCLE BOX) NEAR WHAT ROAD Queensway Dr. 30 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH ☒ WEST ☐ EAST ☐ SOUTH ☐ 34 370 37 DISTANCE FROM ROAD ENTER FT or MI FT 38 39		
USE FOR WATER (CIRCLE APPROPRIATE BOX) ☒ HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) ☐ FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) ☐ INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT) ☐ PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL) ☐ TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL Howard COUNTY NAME A3851Y COUNTY NO. STATE SIGNATURE _____ INSERT S DATE ISSUED 06/14/89 Mark E. Kiffin 12/14/89 CO SIGNATURE _____ NORTH GRID 518000 50 55 EAST GRID 083400 57 63		
APPROXIMATE DEPTH OF WELL 300 24 28 FEET APPROXIMATE DIAMETER OF WELL 6 NEAREST INCH		SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1. well 2. 3. WRITE THE BOX NUMBER FROM THE MAP HERE E 834 N 518		
METHOD OF DRILLING (circle one) BORED (or Augered) ☒ JETTED ☐ Jetted & DRIVEN ☐ 30: AIR-ROTary ☒ AIR-PERCussion ☐ ROTARY (Hydraulic Rotary) ☐ 37: CABLE ☐ REVERSE-ROTary ☐ Drive-POINT ☐ other _____		DRAW A SKETCH, BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION 		
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX) ☒ THIS WELL WILL NOT REPLACE AN EXISTING WELL ☐ THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED 39 ☐ THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY ☐ THIS WELL WILL DEEPMEN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 _____ 52		Not to be filled in by driller (OEP USE ONLY) APPROP. PERMIT NUMBER _____ 54 63 FORCE MR WRITE INITIALS IN BOX 67 68 PERMIT NO. H0-88-0744 70 71 72 73 74 75 76 77 78 79		
SPECIAL CONDITIONS				

C1 0056 SEQUENCE NO. (DENY USE ONLY)

(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND
WELL COMPLETION REPORT
FILL IN THIS FORM COMPLETELY
PLEASE PRINT OR TYPETHIS REPORT MUST BE SUBMITTED WITHIN
45 DAYS AFTER WELL IS COMPLETED.COUNTY
NUMBER

A38514

ST/CO USE ONLY
DATE RECEIVED

DATE WELL COMPLETED

8 13

081087

Depth of Well
22 185 26
(TO NEAREST FOOT)PERMIT NO.
FROM "PERMIT TO DRILL WELL"
40-88-0747OWNER: Greenbaum Assoc last name first name
STREET OR RFD Queensway Dr
SUBDIVISION BURLFISH MANOR SECTION TOWN ELlicott City LOT 677

WELL LOG

Not required for driven wells

STATE, THE KIND OF FORMATIONS
PENETRATED, THEIR COLOR, DEPTH,
THICKNESS AND IF WATER BEARINGDESCRIPTION (Use
additional sheets if needed)FEET
FROM TOCheck
if water
bearingSANDSTONE
Gibby Mica
Rock

0 36

36 185

GROUTING RECORD

WELL HAS BEEN GROUTED
(Circle Appropriate Box)yes no
Y N
44 44

TYPE OF GROUTING MATERIAL

CEMENT CM BENTONITE CLAY BC

NO. OF BAGS 9 NO. OF POUNDS 846

GALLONS OF WATER 54

DEPTH OF GROUT SEAL (to nearest foot)

from 0 ft to 36 ft
48 TOP 52 54 BOTTOM 58
(enter 0 if from surface)

CASING RECORD

casing
types
insert
appropriate
code
belowST CO
STEEL CONCRETE
PL OT
PLASTIC OTHERMAIN
CASING
TYPENominal diameter
top (main) casing
(nearest inch)Total depth
of main casing
(nearest foot)

ST

6

40

EACH
CASING

OTHER CASING (if used)

diameter depth (feet)
inch from toscreen type
or open hole

SCREEN RECORD

insert
appropriate
code
belowST BR HO
STEEL BRASS OPEN
PL BRONZE HOLE
PLASTIC OTHER

C2

1 2

DEPTH (nearest ft.)

H 0

27 185

2

3

EACH
SCREEN

SLOT SIZE 1 2 3

DIAMETER OF SCREEN (NEAREST INCH)

from to

GRAVEL PACK
IF WELL DRILLED WAS
FLOWING WELL INSERT
F IN BOX 68OEP USE ONLY
(NOT TO BE FILLED IN BY DRILLER)

T (E.R.O.S.)

W Q

70

72

74 75 76

TELESCOPE

LOG

OTHER DATA

CASING

INDICATOR

C3

PUMPING TEST

HOURS PUMPED (nearest hour) 3

PUMPING RATE (gal. per min. to nearest gal.) 10

METHOD USED TO MEASURE PUMPING RATE Bucket

WATER LEVEL (distance from land surface)

BEFORE PUMPING 27

WHEN PUMPING 48

TYPE OF PUMP USED (for test)

A air P piston T turbine
C centrifugal R rotary O other (describe below)
J jet S submersible

PUMP INSTALLED

DRILLER WILL INSTALL PUMP YES NO

IF DRILLER INSTALLS PUMP, THIS SECTION
MUST BE COMPLETED FOR ALL WELLS.

EXCEPT HOME USE

TYPE OF PUMP INSTALLED

PLACE (A,C,J,P,R,S,T,O)

IN BOX - SEE ABOVE:

CAPACITY:

GALLONS PER MINUTE (to nearest gallon)

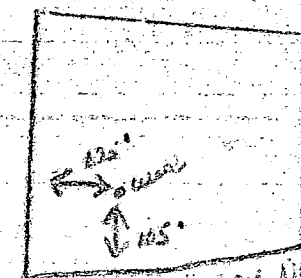
PUMP HORSE POWER

PUMP COLUMN LENGTH (nearest ft.)

CASING HEIGHT (circle appropriate box and enter casing height)

+ above } LAND SURFACE:
- below } (nearest foot)

LOCATION OF WELL ON LOT

SHOW PERMANENT STRUCTURE SUCH AS
BUILDING, SEPTIC TANKS, AND/OR
LANDMARKS AND INDICATE NOT LESS
THAN TWO DISTANCES
(MEASUREMENTS TO WELL)CIRCLE APPROPRIATE LETTER
A A WELL WAS ABANDONED AND SEALED
WHEN THIS WELL WAS COMPLETED.

E ELECTRIC LOG OBTAINED

P TEST WELL CONVERTED TO PRODUCTION
WELLI HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN
ACCORDANCE WITH COMAR 26.04.04 "WELL CONSTRUCTION"
AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE
ABOVE CAPTIONED PERMIT, AND THAT THE INFORMATION PRE-
SENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF
MY KNOWLEDGE.

DRILLERS IDENT. NO. 738

DRILLERS SIGNATURE
(MUST MATCH SIGNATURE ON APPLICATION)SITE SUPERVISOR (sign. of driller or journeyman
responsible for sitework if different from permittee)

COUNTY